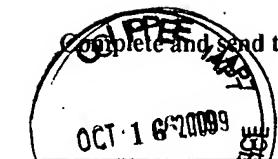


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
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26272 7590 09/03/2009

COWAN LIEBOWITZ & LATMAN P.C.
 JOHN J TORRENTE
 1133 AVE OF THE AMERICAS
 NEW YORK, NY 10036
 10/16/2009 INTEFSW 00008336 10815504

01 FC:1501 1510.00 0P
 02 FC:1504 300.00 0P
 03 FC:4001

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/815,504	03/31/2004	Satoru Wakao	B588-717 (25815.734)	8217

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I hereby certify that this correspondence is being transmitted via the Patent Electronic Filing System (EFS) to the United States Patent and Trademark Office on the date indicated below:

John J. Torrente	(Depositor's name)
<i>John J. Torrente</i>	(Signature)
October 16, 2009	(Date)

TITLE OF INVENTION: IMAGE VERIFICATION APPARATUS AND IMAGE VERIFICATION METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$1440	\$1510	12/03/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
AZARIAN, SEYED H	2624	382-100000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1 <u>Cowan, Liebowitz & Latman, P.C.</u>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2 _____
	3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Canon Kabushiki Kaisha

Recorded: August 16, 2004 Reel: 015679

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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Payment in the amount of \$1,819.00 is hereby made by Electronic Funds Transfer (EFT).
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-3415 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date October 16, 2009

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